POSITION:	!NITIALS	ID NO.	DATE	
			4-[1-0]	
FEE DETERMINATION	BN		- 4-11-01 - 1-11-01	
O.I.P.E. CLASSIFIER			5/8/0/	
FORMALITY REVIEW	MM	920	05-16-01	
RESPONSE FORMALITY REVIEW	W.A	625	DQ. 16.0	

## **INDEX OF CLAIMS**

Rejected	N Non-elected
= Allowed	IInterference
(Through numeral) Canceled	A Appeal
÷ Restricted	O Objected

Claim	Date	Claim Date	Claim	Date
= 9 11 9		la l	Final	
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10-1/		51 52	101	+++++
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3 4	<del>╎┤┤┤┤┤</del> ┤╴╏	54	104	
5 ( 1 1 )	<del> - - - - - - - - - - - - - - - - - - -</del>	55	105	
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9		60	110	
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. 39		89	139	
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46		96	146	
6 2 47		98	147	<del>-                                     </del>
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50	+++++	100	150	
ic-c-	lf	more than 150 claims or 10 staple additional sheet I		